ARPENTER & PARRISH, P.A 5608 NW 43rd STREET GAINESVILLE, FLORIDA 32653-8334 TELEPHONE CUS g FLUC (352) 373-7788 FACSIMILE (352) 373-1114 E-MAIL RONALD A. CARPENTER raclaw@acceleration.net SHARON D. PARRISH 00784-00423-00524-00671 August 20, 2002 vemore "organizer". W02-24445 Florida Department of State **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314 Re: SEDONA ENTERPRISES, LLC ----D \*\*\*\*130.00 \*\*\*\*130.00 Ladies & Gentlemen:

Please find enclosed with this letter our trust check #3375 in the amount of \$130.00 to cover the following costs for filing the Articles of Organization of SEDONA ENTERPRISES, LLC:

Filing fee for Articles of Organization	\$100.00
Designation of Registered Agent	25.00
Certificate of Status	5.00
	\$130.00

Please return the certificate of status to our office at the above address at your earliest convenience. Your cooperation in this matter is greatly appreciated.

Sincerely yours,

02 SEP -9

Barbara M. Wilhite, Legal Assistant

/bw Enclosure



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

August 22, 2002

BARBARA M. WILHITE CARPENTER & PARRISH, P.A. 5608 NW 43RD STREET GAINESVILLE, FL 32653-8334

SUBJECT: SEDONA ENTERPRISES, LLC Ref. Number: W02000024445

We have received your document for SEDONA ENTERPRISES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

You must remove the term "organizer" and replace it with "member" or "authorized representative".,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 802A00049409

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# ARTICLES OF ORGANIZATION OF SEDONA ENTERPRISES, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

#### ARTICLE I -- NAME

The name of the limited liability company shall be Sedona Enterprises, LLC ("company").

### ARTICLE II -- ADDRESS

The mailing address and street address of the principal office of the company are as follows:

Mailing Address

Street Address

6505 NW 81<sup>st</sup> Blvd. Gainesville, FL 32606 6505 NW 81<sup>st</sup> Blvd. Gainesville, FL 32606

#### ARTICLE III -- DURATION

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State or on another effective date as specified. The company's existence shall be perpetual or until the company is dissolved earlier as provided in these articles of organization or in the Regulations.

## ARTICLE IV -- REGISTERED AGENT, REGISTERED OFFICE AND RESIDENT AGENT'S SIGNATURE

The name and street address of the registered agent of the company in the state of Florida are as follows:  $\sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{j=1}^{n} \sum_{j=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i=1}^{n} \sum_{i$ 

> Edward Lucas 6505 NW 81<sup>st</sup> Blvd. Gainesville, FL 32606

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Having been named as the registered agent and to accept service of process for the above-stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position of registered agent as provided in F.S. Chapter 608.

Edward Lucas, Registered Agent

## ARTICLE V -- MANAGEMENT

The company shall be managed by the members in accordance with Regulations adopted or to be adopted by the members for the management of the business and affairs of the company.

Signed, sealed and delivered in our presence as witnesses la BARBARA M. WILHITE Edward Lucas Printed name 0 110 Printed name LAIUA ODre

STATE OF FLORIDA COUNTY OF ALACHUA

lies

SWORN TO and subscribed before me this \_\_\_\_\_ day of August, 2002, by Edward Lucas, who [\_\_] is personally known to me or [\_\_] has produced \_\_\_\_\_\_ as identification.

Notary Public

